

Signature



Compl t if Kn wn

PTO/SB/17 (10-03)
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FEE TRANSMITTAL			Compl t if Kn wn					
LEE IVANOIMITIAL			Application Number 0			827		İ
for FY 2004  Effective 10/01/2003. Patent fees are subject to annual revision.			Filing Date			March 29, 2001		
			First Named Inventor			KI KAKIHARA		
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name			a M. Diaz		
			Art Unit					
TOTAL AMOUNT OF PAYMENT (\$) 180.00			Attorney Docket No. 041194-0279165				<i>_</i>	<i>,</i> _
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						j
Check Credit card Money Other None		ADDIT		L FEES				
X Deposit Account:	Fee	Fee	Fee	Fee	Fee	Description		
Deposit Account 033975	Cod		Code			•	Fee Paid	
Number Deposit	105		2051		-	filing fee or oath provisional filing fee or	<u> </u>	
Account PILLSBURY WINTHROP LLP				co	ver sheet	-		
The Director is authorized to: (check all that apply)	1053		1053		on-English spe or filing a reque	cification est for <i>ex parte</i> reexaminatio	,,	
X Charge fee(s) indicated below Credit any overpayments	1804	2 2,520 \$ 920°	l	•		ication of SIR prior to	"	
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1. BASIC FILING FEE	1252		2252	•		oly within second month	BEC	
Large Entity Small Entity	1253		2253			ply within third month		
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254			ply within fourth month		
1001 770 2001 385 Utility filing fee	125	5 2,010	2255	1,005 Ex	tension for re	ply within fifth month	NOV   1	9 20
1002 340 2002 170 Design filing fee	1401	330	2401		otice of Appea			
1003 530 2003 265 Plant filing fee	1402		2402			pport of an appeal	<del>게임(())  </del>	D E
1004 770 2004 385 Reissue filing fee	1403		2403		equest for oral	<del>-</del>		" =
1005 160 2005 80 Provisional filing fee	'	1 1,510	1451			ite a public use proceeding		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUI	=	3 1,330	2453			e - unintentional	<b>-</b>	
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Extra Claims below Fee Paid  Total Claims	1503		2502		esign issue fee ant issue fee	;		1
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Multiple Dependent =	180		1807			under 37 CFR 1.17(q)		
Large Entity   Small Entity	1806		1806		_	nformation Disclosure Stmt	180.00	
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1202 18 2202 9 Claims in excess of 20	1809		2809	- pr		number of properties) ion after final rejection		
1201 86 2201 43 Independent claims in excess of 3	100		2309	(3	7 ČFR 1.129(a	a))		
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims	1810	770	2810		or each additio camined (37 C	nal invention to be FR 1.129(b))		
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**or number previously paid, if greater; For Reissues, see above	*Re	duced by	/ Basic	Filing Fee	Paid 9	SUBTOTAL (3) (\$)	180.00	J
SUBMITTED BY (Complete (if applicable)								
Name (PrintlType) Glenn J. Perry Registration No. (Attorney/Agent) 28458 Telephone (703) 905-2161							2161	1
Signature Road		(Attorne)			-	Date November 5,		<b>j</b>

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